

GRANT COUNTY CONSERVATION, SANITATION AND ZONING DEPARTMENT

REQUEST FOR TOWNSHIP PARTICIPATION

LAWS REGARDING COMPREHENSIVE PLANS:

Wisconsin Statute 66.1001(3) ACTIONS, Procedures that must be consistent with comprehensive plans. Beginning on January 1, 2010, land-use decisions made by local governmental units shall be consistent with that local governmental unit's Comprehensive Plan.

Section – 1

APPLICANT COMPLETES SECTION - 1

To the request for (Name) _____ to be granted a:

↓ Request type: (Note in some cases a Zoning District Change may include a Comp. Plan Map Change)

Brief description of request ↓

_____ ZONING DISTRICT CHANGE → _____

_____ COMP. PLAN MAP CHANGE → _____

_____ CONDITIONAL USE → _____

_____ VARIANCE → _____

_____ SPECIAL EXCEPTION → _____

For the property: Tax Parcel# _____ - Property Address _____

APPLICANT: *To get this form completed by the Town, have your request placed on the Town Board Meeting Agenda. To ensure that the CSZ Committee or the Board of Adjustment will hear your request, be sure to return this completed form with your application.*

Section – 2

TOWN BOARD: PLEASE COMPLETE SECTION – 2

----- **Questions 1 thru 4 must be answered to validate this document** -----

CIRCLE ONE

1 - Does the town have any regulations (town ordinance) that would apply to the request? ----- Yes No

If yes – please explain: _____

2 - Is the request consistent with the Towns Comprehensive Plan objectives and policies? ----- Yes No N/A

3 - If the request is not consistent with the Towns Comprehensive Plan,

Does the Town wish to amend the Comprehensive Plan to allow the request? ----- **Yes No N/A**

4 - Does the town wish to allow the requested to change the Zoning District only? ----- Yes No N/A

THE TOWN OF _____ TOWN BOARD ON THIS DATE _____

☐ **DOES NOT OBJECT TO THE REQUEST**

☐ **OBJECTS TO THE REQUEST**

Board Vote: Number In-Favor _____ Number Opposed _____ Number Abstained _____

Reason(s) for the town board decision: _____

CHAIRMAN

CLERK

SUPERVISOR

SUPERVISOR

UPON COMPLETION RETURN TO APPLICANT

GRANT COUNTY

CONSERVATION, SANITATION AND ZONING DEPT

150 West Alona Lane, Suite #1, Lancaster, WI 53813 608/723-6377 X4

sanitation@co.grant.wi.gov

Fax: (608) 723-6792

CONDITIONAL USE PERMIT {CUP} APPLICATION PROCEDURES

FEE: \$400.00

The following is a review of the overall procedure involved in applying for a Conditional Use Permit (CUP). This review is not meant to be all-inclusive for all cases, but will provide an idea of what processes and materials are needed to successfully complete your CUP request. The Conservation, Sanitation & Zoning (CSZ) Dept. staff will answer questions about the application, but the staff cannot be responsible for any defects that may arise in your application nor provide you with legal advice.

This packet contains: 1- A Conditional Use Permit Application form, 2- A Request for Town Participation form.

Application: A completed Conditional Use Permit application must be signed by the current property owner(s) then submitted {with fee} to the Grant County CSZ Dept. before a public hearing date can be scheduled.

The Town Participation Form must be completed by the town then submitted to the CSZ Dept. prior to the hearing.

If the Town Participation Form is not received and accepted by the CSZ Dept. in time for the CSZ Committee hearing and the request is postponed as a result, the applicant shall be required to pay another application fee.

If the CUP applies only to a portion of a larger parcel or part of a base farm tract a land division survey map is required. On the CUP Application under Property Location the complete legal description of the property is required including the Tax Parcel ID number. The full legal description may be an attachment to this document.

The legal description can be obtained from the following: (1) Property tax bill, (2) Plat of Survey, (3) Title policy, (4) From a Licensed Surveyor if a land division is required when the CUP applies to a portion of a larger parcel.

The application must be signed by all property owners and only original documents are accepted, no copies or faxes.

If an agent is to sign the application, written proof of agent authority is required to accompany the application.

If the property is in a Trust, the Trustee must sign the application and provide proof of authority with the names and addresses of all those with a beneficial interest in the Trust.

Please include a day time phone number on the application so we may reach you for questions or additional information.

Public hearing: A Conditional Use Permit requires a public hearing before the Town the property is located in, then the CSZ Committee and then the Grant County Board. Public hearings are scheduled on a first come, first served basis and are held at the Grant County Administrative Building.

Your first step is to contact the Town the property is located in and request a Conditional Use Permit determination. The second and final step is the CSZ Committee hearing. This hearing requires a class 2 public notice posting. The CUP request is posted twice for 2 consecutive weeks.

At the CSZ Committee the petitioner, petitioner's attorney or agent must attend the public hearing and present testimony. The CSZ Committee does not require that the petitioner have an attorney; however, they may be represented if they wish. This presentation can be of any length and can involve any additional materials that are relevant to the CUP request although the CSZ Committee would prefer that all presentation be kept as short as possible.

The rationale for zoning relief must be given in narrative form by the petitioner and with information provided that the proposed CUP and/or associated structures are in accordance with the purpose and intent of the relevant Ordinance(s) and are not hazardous, harmful, offensive or otherwise adverse to the environment or the community.

The order of presentation will be: (1) – The request is read into the record, (2) – CSZ staff findings, (3) – Petitioners presentation, (4) - Persons in support, (5) - Persons in opposition.

All materials presented as evidence and exhibits by the petitioner will be marked and retained by the CSZ Committee.

All questions arising from the public shall be directed to the CSZ Committee Chairperson.

Board Decision: Following the CSZ Committee Hearing and assuming no extenuating circumstances accrue, the CSZ Committee will make a final decision to deny or grant the Conditional Use Permit. The CSZ Committee may recess to closed session and reconvene in open session to announce the decision. The CSZ Committee may conditionally approve a Conditional Use Permit.

If a land division is part of an approved CUP, the survey map must be recorded with the Register of Deeds before a Zoning Permit will be issued.

GRANT COUNTY CONDITION USE PERMIT {CUP} APPLICATION

sanitation@co.grant.wi.gov

Phone: 608-723-6377 X4

FAX: 608-723-6792

Office use:

Tax Parcel # _____ Fee Paid \$ _____ Date Received: _____

County Zoning District: _____ SPO Zoning District: _____ FIRM/Flood Study: _____

Applicant:

Owner(s) Name _____

Mailing Address _____

Phone# _____

Property Location:

_____ 1/4 _____ 1/4 Sec. _____ T _____ N R _____ W

Lot _____ Block _____ Addition _____

Subdivision/CSM# _____

Town of _____

Property information:

Tax Parcel # _____

Total area of the base farm tract (total acreage of the contiguous property) is: _____ acres

Total area of the proposed parcel(s) is: _____, _____ acres {area(s) in square feet if less than an acre is: _____, _____}

Current use is: _____ *Proposed use is:* _____

Conditional Use Permit Request:

As provided in Section # _____ of the Grant County _____ Ordinance

A Conditional Use Permit is requested so that the following use or activity may be allowed: _____

Plot Plan: An attached plot plan or location sketch drawn to scale or with dimensions is required showing the location, boundaries, uses and sizes of all existing and proposed structures, property lines, sanitary system, utilities, parking areas, property drainages, proposed excavation and/or filling, roads and road rights-of-way lines, easements, driveways, trees, all other pertinent features and any additional information as requested by department staff pursuant to this Conditional Use Permit request.

REVOCATION:

A Conditional Use Permit may be revoked if:

1. The use does not conform, with the conditions of approval within the time established in the permit,
2. The use does not continue to conform with the conditions of the original approval,
3. The character of the use itself has changed, causing the use to be incompatible with the surrounding area; or
4. The use no longer conforms to public health, safety and welfare needs.

Action to terminate a conditional use permit may be taken by the Grant County Conservation, Sanitation & Zoning Committee.

After revocation of the conditional use permit, such use shall be classified as a nonconforming use.

IMPORTANT: If the Town Participation Form is not received and accepted by the CSZ Dept. prior to the CSZ Committee hearing and the request is postponed as a result, the applicant shall be required to pay another application fee.

I/We the undersigned are applying for a Conditional Use Permit for the above described property and I/We hereby state that the information on this application, the attached plot plan, and materials presented as evidence or exhibits pursuant to this request are accurate. I/We the undersigned property owner(s) hereby grant permission to Grant Co. CSZ Dept. staff to enter upon the above described property at their discretion during normal working hours to acquire information pursuant to this request.

I/We the undersigned property owner(s) hereby grant permission for the Grant County CSZ Committee hearing to be held on the above described property at the discretion of the Committee Chairperson.

Property Owner(s) Signature _____

Date _____